

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A
PAYMENT ISSUE DATE: 7/26/2013

ALAMEDA COUNTY TREASURER
1221 OAK STREET

OAKLAND CA 94612

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.03911790

Gross Claim	\$	1,241,345.20
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,241,345.20
YTD Amount:	\$	12,319,660.97

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A
PAYMENT ISSUE DATE: 7/26/2013

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE CA 96120

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00010613

Gross Claim	\$	3,367.87
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	3,367.87
YTD Amount:	\$	33,422.21

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A
PAYMENT ISSUE DATE: 7/26/2013

AMADOR COUNTY TREASURER
810 COURT STREET

JACKSON CA 95642

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00132859

Gross Claim	\$	42,160.72
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	42,160.72
YTD Amount:	\$	418,423.14

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

BUTTE COUNTY TREASURER

25 COUNTY CENTER DR

OROVILLE CA

95965

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.00893807

Gross Claim	\$	283,635.63
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	283,635.63
YTD Amount:	\$	2,805,123.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00136296

Gross Claim	\$	43,251.40
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	43,251.40
YTD Amount:	\$	429,247.76

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

COLUSA COUNTY TREASURER

546 JAY ST

COLUSA CA

95932

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.00106887

Gross Claim	\$	33,918.91
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	33,918.91
YTD Amount:	\$	330,576.14

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

CONTRA COSTA COUNTY TREASURER

625 COURT ST RM 102

MARTINEZ CA

94553

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.02011995

Gross Claim	\$	638,475.05
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	638,475.05
YTD Amount:	\$	6,336,511.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY CA 95531

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00127154

Gross Claim	\$	40,350.33
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	40,350.33
YTD Amount:	\$	400,453.50

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

EL DORADO COUNTY TREASURER

360 FAIR LANE

PLACERVILLE CA

95667

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00494732

Gross Claim	\$	156,995.44
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	156,995.44
YTD Amount:	\$	1,543,072.54

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA

95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.02544470

Gross Claim	\$	807,447.64
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	807,447.64
YTD Amount:	\$	8,013,468.63

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS CA 95988

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00122313

Gross Claim	\$	38,814.11
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	38,814.11
YTD Amount:	\$	385,208.42

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

HUMBOLDT COUNTY TREASURER

825 FIFTH STREET ROOM 125

EUREKA CA

95501

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.00862799

Gross Claim	\$	273,795.73
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	273,795.73
YTD Amount:	\$	2,600,913.32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

IMPERIAL COUNTY TREASURER

940 WEST MAIN STREET

EL CENTRO CA

92243 2863

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00880356

Gross Claim	\$	279,367.17
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	279,367.17
YTD Amount:	\$	2,716,905.28

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

INYO COUNTY TREASURER

P O BOX O

INDEPENDENCE CA

93526

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00165904

Gross Claim	\$	52,647.03
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	52,647.03
YTD Amount:	\$	522,490.32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO CA

95798 1240

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.01721219

Gross Claim	\$	546,201.85
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	546,201.85
YTD Amount:	\$	5,420,750.22

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA

95812 1406

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00445853

Gross Claim	\$	141,484.46
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	141,484.46
YTD Amount:	\$	1,404,152.64

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

LAKE COUNTY TREASURER

255 NORTH FORBES ST RM 215

LAKEPORT CA

95453

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00199460

Gross Claim	\$	63,295.50
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	63,295.50
YTD Amount:	\$	628,173.57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00134019

Gross Claim	\$	42,528.83
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	42,528.83
YTD Amount:	\$	422,075.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA

95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.31055685

Gross Claim \$ 9,855,034.49

County Medical Services Program Offset \$ 0.00

Net Claim / Payment Amount \$ 9,855,034.49

YTD Amount: \$ 97,805,717.27

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00444445

Gross Claim	\$	141,037.65
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	141,037.65
YTD Amount:	\$	1,398,167.24

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

MARIN COUNTY TREASURER

PO BOX 4220

CIVIC CENTER

SAN RAFAEL CA

94913

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00978123

Gross Claim	\$	310,391.99
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	310,391.99
YTD Amount:	\$	2,986,824.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA CA

95338

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00071280

Gross Claim	\$	22,619.59
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	22,619.59
YTD Amount:	\$	224,489.65

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH CA

95482

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00285164

Gross Claim	\$	90,492.32
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	90,492.32
YTD Amount:	\$	898,085.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

MERCED COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 981311

WEST SACRAMENTO 95798-1311

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00629714

Gross Claim	\$	199,829.86
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	199,829.86
YTD Amount:	\$	1,983,199.94

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

MODOC COUNTY TREASURER

204 COURT ST RM 101

ALTURAS CA

96101

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00079120

Gross Claim	\$	25,107.49
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	25,107.49
YTD Amount:	\$	249,179.44

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

MONO COUNTY TREASURER

P O BOX 495

BRIDGEPORT CA

93517

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.00114140

Gross Claim	\$	36,220.54
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	36,220.54
YTD Amount:	\$	359,466.98

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA

95812 1406

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.00812079

Gross Claim	\$	257,700.53
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	257,700.53
YTD Amount:	\$	2,557,535.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

NAPA COUNTY TREASURER

1195 THIRD STREET ROOM 108

NAPA CA

94559 3035

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00419176

Gross Claim	\$	133,018.93
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	133,018.93
YTD Amount:	\$	1,300,077.15

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY CA

95959

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00269975

Gross Claim	\$	85,672.33
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	85,672.33
YTD Amount:	\$	845,707.84

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.06443974

Gross Claim	\$	2,044,894.07
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	2,044,894.07
YTD Amount:	\$	20,294,435.82

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

PLACER COUNTY TREASURER

2976 RICHARDSON DRIVE

AUBURN CA

95603

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00380643

Gross Claim	\$	120,791.09
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	120,791.09
YTD Amount:	\$	1,198,782.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY CA

95971

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00113417

Gross Claim	\$	35,991.11
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	35,991.11
YTD Amount:	\$	340,794.69

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO CA 95812 4035

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.03289207

Gross Claim	\$	1,043,778.25
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,043,778.25
YTD Amount:	\$	10,358,915.38

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.03445504

Gross Claim	\$	1,093,376.65
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,093,376.65
YTD Amount:	\$	10,851,154.17

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SAN BENITO COUNTY TREASURER

COURTHOUSE

440 FIFTH ST RM 107

HOLLISTER CA

95023

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00159151

Gross Claim	\$	50,504.07
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	50,504.07
YTD Amount:	\$	501,223.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SAN BERNARDINO COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA

95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.03996867

Gross Claim	\$	1,268,343.05
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,268,343.05
YTD Amount:	\$	12,587,600.08

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST SACRAMENTO 95798 0304

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.07799923

Gross Claim	\$	2,475,183.22
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	2,475,183.22
YTD Amount:	\$	24,564,810.83

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

95814-2920

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.05924515

Gross Claim	\$	1,880,051.91
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,880,051.91
YTD Amount:	\$	18,658,469.16

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.01529153

Gross Claim	\$	485,252.72
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	485,252.72
YTD Amount:	\$	4,815,864.79

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SAN LUIS OBISPO COUNTY TREASURER

PO BOX 1149

SAN LUIS OBISPO CA

93406

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00459188

Gross Claim	\$	145,716.11
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	145,716.11
YTD Amount:	\$	1,446,152.82

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.01397274

Gross Claim	\$	443,402.99
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	443,402.99
YTD Amount:	\$	4,400,527.42

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SANTA BARBARA COUNTY TREASURER

PO BOX 579

SANTA BARBARA CA

93102

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00838718

Gross Claim	\$	266,154.00
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	266,154.00
YTD Amount:	\$	2,641,429.81

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SANTA CLARA COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA

95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.03392573

Gross Claim	\$	1,076,579.83
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,076,579.83
YTD Amount:	\$	10,684,454.25

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SANTA CRUZ COUNTY TREASURER

PO BOX 1817

SANTA CRUZ CA

95061

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00556854

Gross Claim	\$	176,708.88
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	176,708.88
YTD Amount:	\$	1,753,738.72

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA

95812 1859

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00771515

Gross Claim	\$	244,828.18
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	244,828.18
YTD Amount:	\$	2,395,397.60

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE CA

95936 0376

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00026775

Gross Claim	\$	8,496.63
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	8,496.63
YTD Amount:	\$	84,325.88

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA CA

96097

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.00208335

Gross Claim	\$	66,111.84
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	66,111.84
YTD Amount:	\$	656,120.36

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SOLANO COUNTY TREASURER TAX COLLECTOR

675 TEXAS ST STE 1900

FAIRFIELD CA

94533 6337

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.01114864

Gross Claim	\$	353,784.60
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	353,784.60
YTD Amount:	\$	3,511,116.81

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO CA

95812 1204

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.01734411

Gross Claim	\$	550,388.13
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	550,388.13
YTD Amount:	\$	5,300,135.18

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO CA

95353 3052

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.01168672

Gross Claim	\$	370,859.73
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	370,859.73
YTD Amount:	\$	3,680,576.52

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY CA

95992

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.00403600

Gross Claim	\$	128,076.13
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	128,076.13
YTD Amount:	\$	1,251,265.47

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF CA

96080

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00274330

Gross Claim	\$	87,054.32
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	87,054.32
YTD Amount:	\$	861,186.84

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

TRINITY COUNTY TREASURER

PO BOX 1297

WEAVERVILLE CA

96093 1297

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00117460

Gross Claim	\$	37,274.09
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	37,274.09
YTD Amount:	\$	369,924.81

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

TULARE COUNTY TREASURER

COUNTY CIVIC CENTER RM 103E

221 SOUTH MOONEY BL

VISALIA CA 93291

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.01120898

Gross Claim	\$	355,699.40
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	355,699.40
YTD Amount:	\$	3,530,120.31

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

TUOLUMNE COUNTY TREASURER

2 SOUTH GREEN ST

SONORA CA

95370

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00211075

Gross Claim	\$	66,981.34
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	66,981.34
YTD Amount:	\$	664,750.34

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO CA 95798 0307

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.01334318

Gross Claim	\$	423,424.89
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	423,424.89
YTD Amount:	\$	4,202,253.09

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND CA

95695

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00370281

Gross Claim	\$	117,502.87
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	117,502.87
YTD Amount:	\$	1,166,149.23

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

YUBA COUNTY TREASURER

915 8TH ST STE 103

MARYSVILLE CA

95901 5273

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00354044

Gross Claim	\$	112,350.31
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	112,350.31
YTD Amount:	\$	1,103,797.13

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

BERKELEY CITY TREASURER

2081 CENTER STREET

BERKELEY CA

94704

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected: \$271,012,250.15 **Percentage of collection:** 0.11709224

Gross monthly apportionment: \$31,733,431.44 **County/City Ratio:** 0.00143779

Gross Claim	\$	45,626.01
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	45,626.01
YTD Amount:	\$	452,810.45

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

LONG BEACH CITY TREASURER

333 W OCEAN BL

LONG BEACH CA

90802

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00644649

Gross Claim	\$	204,569.25
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	204,569.25
YTD Amount:	\$	2,030,232.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200379A

PAYMENT ISSUE DATE: 7/26/2013

PASADENA CITY TREASURER

PO BOX 7115

PASADENA CA

91109 7215

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2012-13

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 6/16/2013 TO: 7/15/2013

Total amount collected:	\$271,012,250.15	Percentage of collection:	0.11709224
Gross monthly apportionment:	\$31,733,431.44	County/City Ratio:	0.00212606

Gross Claim	\$	67,467.18
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	67,467.18
YTD Amount:	\$	669,575.46